

AHCCCS NPI Extended Contingency Planning Efforts

Revision as of - 12/28/2007

- **Documentation of Good Faith Efforts**
 - All AHCCCS system programming changes to support NPI implementation, with the exception of all changes related to the 835 transaction were completed and promoted in October of 2006. Since that time AHCCCS has been operating in an optional use period allowing providers to submit their Legacy Id numbers or NPI numbers known to the AHCCCS system.
 - Copy of the project plan available upon request.
 - Weekly reports are run to track and document the number of NPIs on the system vs. the total number of NPI's identified as needed. To date these reports continue to demonstrate the lack of NPI "sharing" by AHCCCS providers.
 - AHCCCS provider outreach efforts to date have included documentation via the AHCCCS website, monthly provider newsletters, and 1 on 1 meetings with FFS providers.
 - Managed Care Plans have also conducted extensive provider outreach efforts as outlined in individual NPI Contingency Plans.
 - AHCCCS has supported and encouraged Trading Partner NPI testing since August of 2006 and is supporting this on an ongoing basis. A copy of current AHCCCS NPI Testing Guidelines is available on the AHCCCS Website. To date testing has been limited due to the lack of availability, or refusal by, trading partners to test transactions.
 - A list of currently identified challenges and/or areas of concern including *but not limited to the following*: many NPI's to one AHCCCS Id; one NPI to multiple AHCCCS Ids; billing providers, who are also service providers; ongoing support and recognition of "secondary" NPI information not "accessible" to Billing Providers; Review of Validator editing for NPI information; etc is being maintained and actively addressed.
 - NPI information, as captured in PMMIS, is shared with all Managed Care Organizations on a weekly basis for comparison and reconciliation to their internal Provider systems.
 - NPI's were required as applicable for all New AHCCCS Provider Registrations effective March 1, 2007.
- **Proposed additional provider outreach/testing efforts during the extended Contingency Period**
 - AHCCCS plans to continue the feedback to MCO's of Encounter NPI related data. This is facilitated through the generation of Top Submitter reports by plan.
 - AHCCCS plans track the submissions of NPI related claims data facilitated through the direct provider contact for those providers identified through the generation of Top Submitter and Billing Provider reports for FFS.
 - AHCCCS will perform targeted outreach to the Top submitting and billing providers by program and will ask that Managed Care Plans participate in this effort, with a goal of 100% of the required NPI's on file for these providers as required

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- AHCCCS will continue to evaluate current options available for providers to communicate NPI related information.
 - AHCCCS will continue to evaluate current options available for providers to validate NPI related information in PMMIS.
 - AHCCCS will continue and expand upon its partnership with Managed Care Plans on outreach efforts.
 - AHCCCS will identify and utilize existing industry communications options.
 - AHCCCS will require, obtain and track key Trading Partner Contingency Plans including those of its Managed Care Organizations.
 - AHCCCS will continue to outline, resolve and document system challenges and/or areas of concern.
- **AHCCCS will conduct and document ongoing monitoring of progress related to noted provider outreach/testing efforts.**
- **Upon request AHCCCS will submit a copy of its NPI Contingency Documentation to CMS.**
- **Resources and Roles:**

Resource Name	Role
Marc Leib, MD	Executive Sponsor
Valerie Noor, David Mollenhauer, Mary Kay McDaniel, Rodd Mas, Lori Petre	NPI Project Sub-Workgroup
Dan Lippert	ISD Applications
Tom Betlach, Kate Aurelius, Shelli Silver, Jim Cockerham, Linda Martin, Jim Wang	Project Steering Committee

- **Please direct any questions to the AHCCCS NPI Project Manager Lori Petre**
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AHCCCS NPI Contingency Dates:

837 and Paper Claims Transactions

- ☐ Primary (rendering/service) providers **MUST** use an NPI (if required for their Provider Type), but AHCCCS will not enforce submission of the NPI until processing dates of 3/1/2008 and after.
- ☐ Secondary providers (referring, attending, operating) (if required or submitted) **MUST** use an NPI, but AHCCCS will accept submissions of both the NPI and/or other legacy identifiers until processing dates of 4/1/2008 and after.

837 Encounter Transactions

- ☐ Primary (rendering/service) providers **MUST** use an NPI (if required for their Provider Type), but AHCCCS will not enforce submission of the NPI until processing dates 3/1/2008 and after.

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- Secondary providers (referring, attending, operating) (if required or submitted) MUST use an NPI, but AHCCCS will accept submissions of both the NPI and/or other legacy identifiers until processing dates of 4/1/2008 and after.

NCPDP and Paper Claims Transactions

- Primary (rendering/service) providers MUST use an NPI (if required for their Provider Type), but AHCCCS will not enforce submission of the NPI until processing dates 3/1/2008 and after.
- Secondary providers (referring, attending, operating) (if required or submitted) MUST use an NPI, but AHCCCS will accept submissions of both the NPI and/or other legacy identifiers until processing dates of 4/1/2008 and after.

NCPDP Encounter Transactions

- Primary (rendering/service) providers MUST use an NPI (if required for their Provider Type), but AHCCCS will not enforce submission of the NPI until processing dates 3/1/2008 and after.
- Secondary providers (referring, attending, operating) (if required or submitted) MUST use an NPI, but AHCCCS will accept submissions of both the NPI and/or other legacy identifiers until processing dates of 4/1/2008 and after.

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270/271 Transactions

- ☐ Providers SHOULD use an NPI (if required for their Provider Type), but AHCCCS will not enforce use of the NPI until processing dates 3/1/2008 and after.

On-Line Web Based Transactions (Claim Status Lookup)

- ☐ Providers SHOULD use an NPI (if required for their Provider Type), but AHCCCS will not enforce use of the NPI until processing dates 3/1/2008 and after.

Provider Registration Records

- ☐ Provider records SHOULD contain valid NPI information (if required for the Provider Type), but AHCCCS will not suspend any Provider records for lack of an NPI until 3/1/2008.

Provider Affiliation File

- ☐ Health Plans SHOULD submit with an NPI (if required for the provider type), but AHCCCS will not enforce use of the NPI until processing dates 3/1/2008 and after.

Provider Type Indicators (RF636)

- ☐ Provider records SHOULD contain valid NPI information (if required for the provider type), but AHCCCS will not enforce use of the NPI until processing dates 3/1/2008 and after.

Validator

- ☐ Health Plans SHOULD submit with an NPI (if required for the provider type), but AHCCCS will accept both the NPI and/or other legacy identifiers on an ongoing basis due to the need to support claims and encounters for Atypical Providers.

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Timeline:

- Completion and Submission of Health Plan/Program Contractor Contingency Plans – **No later than 6/1/2007** – *Completed.*
- Initiation of all Trading Partner Testing – **No later than 2/1/2007**
- Health Plan/Program Contractor System Readiness – **No later than 2/1/2007**
- Required Compliance Date for Primary (Rendering/Service) Providers – **3/1/2008**
- Required Compliance Date for Secondary Providers (Prescribing, Attending, Referring and Operating) – **4/1/2008**

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Managed Care Organization Contingency Document to:

- Documentation of Good Faith Efforts
 - Indicate level of readiness to complete hard cutover to the NPI for health care covered entities
 - Include copy of the project plan
 - Document the number of NPIs on the system vs. the total number of NPI's identified as needed.
 - List the provider outreach efforts to date
 - Include copy of current NPI Trading Partner Testing Guidelines/Status
 - List currently identified challenges and/or areas of concern
- Provide Key Resource Names and Project Roles
- Outline proposed additional provider outreach/testing efforts (See AHCCCS Plan for Examples)
 - xxx
 - xxx
 - xxx
- Outline proposed Contingency Scope and Related Timeline (If proposed to deviate from AHCCCS specified timelines, please provide detailed explanation)
- *Submit to AHCCCS (on an ongoing basis by the 15th of each month).*